

**CLIENT QUESTIONNAIRE- Part 1**  
**(General Information)**

Client's Name: \_\_\_\_\_ Date: \_\_\_\_\_

**PRIVACY NOTICE**

**THE INFORMATION IN THIS DOCUMENT IS PRIVATE BECAUSE OF  
THE ATTORNEY-CLIENT PRIVILEGE AND ATTORNEY WORK PRODUCT  
IN THE TEXAS LAWS AND NO ONE ELSE WILL GET TO SEE IT.**

About you:

1. Please use the name on your driver license and social security card.

**Full Name:** \_\_\_\_\_ **Maiden Name:**

\_\_\_\_\_

**Birth date:** \_\_\_\_\_ **Sex:** \_\_\_\_\_ **Race:**

\_\_\_\_\_

Birthplace City: \_\_\_\_\_ State/ Country: \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_ **Driver's license  
number:** \_\_\_\_\_

Do either one of you want a name change? Yes \_\_\_\_ No \_\_\_\_

Name:

\_\_\_\_\_

2. Where do you live?

**Address:**

\_\_\_\_\_

**City:** \_\_\_\_\_ **County:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:**

\_\_\_\_\_

**Home phone:** \_\_\_\_\_ **Mobile Phone:**

\_\_\_\_\_

How long have you lived in Texas? \_\_\_\_\_ How long in Dallas County? \_\_\_\_\_

3. How do you prefer that we contact you?

**Mail Address:** \_\_\_\_\_ (same as above).

**Or different mailing address:**

\_\_\_\_\_

**Phone and the best time to reach you:**

\_\_\_\_\_

4. Please complete the following information concerning your employment.

Employer: \_\_\_\_\_

**Job title:**

\_\_\_\_\_

**Street address:**

\_\_\_\_\_

**City, state, zip:**

\_\_\_\_\_ **Telephone**

**number:** \_\_\_\_\_ **May we call you at work? Yes\_/No\_\_\_\_\_**

Gross salary per month or annually: \_\_\_\_\_ Length of employment: \_\_\_\_\_

5. *Information about the other person involved in this case (spouse, ex-spouse or your children's other parent):*

**Name:** \_\_\_\_\_ **Maiden Name:**

\_\_\_\_\_

**Birth date:** \_\_\_\_\_ **Sex:** \_\_\_\_\_ **Race:**

\_\_\_\_\_

Birthplace City: \_\_\_\_\_ State/ Country: \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_ **Driver's license**

**number:** \_\_\_\_\_

6. Where is your spouse or ex-spouse living now, and what is his or her phone number?

**Address:**

\_\_\_\_\_

**City:** \_\_\_\_\_ **County:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:**

\_\_\_\_\_

**Home phone:** \_\_\_\_\_ **Mobile Phone:**

\_\_\_\_\_

7. Who does your spouse work for?

Employer: \_\_\_\_\_

**Job**

**title:** \_\_\_\_\_

**Street**

**address:** \_\_\_\_\_

**City, state,**

**zip:** \_\_\_\_\_

**Telephone**

**number:** \_\_\_\_\_

Gross salary per month or annually: \_\_\_\_\_ Length of employment: \_\_\_\_\_

**About your marriage and separation:**

8. Please give the date and place of your marriage:

Date: \_\_\_\_\_ Place: \_\_\_\_\_

9. Are you separated? Yes \_\_\_ / No \_\_\_ If so, date of separation: \_\_\_/\_\_\_/\_\_\_

10. Does the wife have any children born during the marriage or is expecting one by another **man other than the husband?** (From the date of the marriage as of today).

Yes \_\_\_\_\_ No \_\_\_\_\_

11. If So, Name of child (ren): \_\_\_\_\_

12. Date of Birth: \_\_\_\_\_ AG Case: \_\_\_\_\_

Name of father (s): \_\_\_\_\_